

# ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)  
1/4/2008

**PRODUCER**

**BOLLINGER**  
101 JFK PARKWAY  
SHORT HILLS, NJ 07078  
TELEPHONE: 1-800-526-1379

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**

CODE SUB-CODE

**INSURED REGISTERED TEAMS OF THE AMATEUR SOFTBALL ASSOCIATION OF AMERICA**

Brewster Rockets SB LG  
John Wahlers  
40 Tonetta Lake Way  
Brewster, NY 10509

COMPANY LETTER	A	<b>MARKEL INSURANCE COMPANY</b>
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	3602AH230069	*SEE EFFECTIVE DATES BELOW	01/01/09	GENERAL AGGREGATE \$5,000,000
X	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OPS AGGREGATE \$2,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADVERTISING INJURY \$2,000,000
A	PARTICIPANT LIABILITY	Number of Teams: 6			EACH OCCURRENCE \$2,000,000
		*GENERAL AGGREGATE APPLIES PER TEAM			FIRE DAMAGE (Any one fire) \$300,000
					MEDICAL EXPENSES (Any one person) \$10,000

**IMPORTANT: TEAMS MUST BE CURRENTLY REGISTERED WITH ASA TO BE ELIGIBLE FOR COVERAGE.**

(Non-participants only)

EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME
1/1/2008 Brewster Rockets 10U	1/1/2008 Brewster Rockets 12U	1/1/2008 Brewster Rockets 14U Younger
1/1/2008 Brewster Rockets 14U Older	1/1/2008 Brewster Rockets 16U	1/1/2008 Brewster Rockets 18U

Important Note - If Waiver and Release Plan purchased, signed forms must be kept by Team/League for a minimum of three years.

COVERAGE UNDER THIS POLICY SHALL APPLY TO LIABILITY OF THE INSURED TEAM/LEAGUE LISTED ABOVE ARISING OUT OF THE ADMINISTRATION, PLAY OR PRACTICE OF AMATEUR SOFTBALL/BASEBALL, BUT ONLY FOR INCIDENTS INVOLVING BODILY INJURY, PERSONAL INJURY OR PROPERTY DAMAGE.

**CERTIFICATE HOLDER**

Brewster Rockets SB LG  
John Wahlers  
40 Tonetta Lake Way  
Brewster, NY 10509

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE




THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION FOR  
AMATEUR SOFTBALL ASSOCIATION OF AMERICA ACTIVITIES**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM**

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

Named Insured As shown on the attached Certificate of Insurance		
Policy Number 3602AH230069	Policy Period 01/01/08 - 01/01/09	Endorsement Effective Date As shown on the attached Certificate of Insurance
Issued By <b>MARKEL INSURANCE COMPANY</b>	Authorized Representative 	

(The above information is required only when this endorsement is prepared after the policy is issued.)

**SCHEDULE**

**Name of Person or Organization:**

As shown on the attached Certificate of Insurance

**A. The following is added to Section II – WHO IS AN INSURED:**

The person or organization shown in the above SCHEDULE but only with respect to liability arising out of the organization, promotion, administration and conduct of amateur softball/baseball activities, including games, practices, tournaments, and fund-raising activities, under the rules of the Amateur Softball Association of America, provided:

- a. That if the person or organization is designated as a Team, the person or organization so designated shall be deemed to include team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the team, and if so indicated, a Field Owner, but only for liability arising out of the designated Team's amateur softball/baseball activities covered under this policy;
- b. That if the person or organization is designated as a League, the interest of the League shall not be included unless all teams in the League purchase this insurance.

When the interest of the League is so included, the person or organization designated as a League shall be deemed to include all teams in the league and team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the League or of any such teams, and if so indicated, a Field Owner, but only for liability arising out of the designated League's amateur softball/baseball activities covered under this policy;

All other terms and conditions of this policy remain unchanged.

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**COMPANIES AFFORDING COVERAGE**

CODE SUB-CODE

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SOFTBALL ASSOCIATION OF AMERICA**

Brewster Rockets SB LG  
John Wahlers  
40 Tonetta Lake Way  
Brewster, NY 10509

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A	<input checked="" type="checkbox"/> PARTICIPANT LIABILITY	Number of Teams: 6 *GENERAL AGGREGATE APPLIES PER TEAM			(Non-participants only)

**IMPORTANT: TEAMS MUST BE CURRENTLY REGISTERED WITH ASA TO BE ELIGIBLE FOR COVERAGE.**

EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME
1/1/2008 Brewster Rockets 10U	1/1/2008 Brewster Rockets 12U	1/1/2008 Brewster Rockets 14U Younger
1/1/2008 Brewster Rockets 14U Older	1/1/2008 Brewster Rockets 16U	1/1/2008 Brewster Rockets 18U

Important Note - If Waiver and Release Plan purchased, signed forms must be kept by Team/League for a minimum of three years.

COVERAGE UNDER THIS POLICY SHALL APPLY TO LIABILITY OF THE INSURED TEAM/LEAGUE LISTED ABOVE ARISING OUT OF THE ADMINISTRATION, PLAY OR PRACTICE OF AMATEUR SOFTBALL/BASEBALL, BUT ONLY FOR INCIDENTS INVOLVING BODILY INJURY, PERSONAL INJURY OR PROPERTY DAMAGE. THE CERTIFICATE HOLDER BELOW IS NAMED AS AN ADDITIONAL INSURED TO THIS POLICY (SEE ENDORSEMENT PAGE ATTACHED).

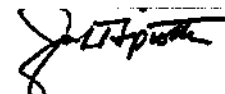
**CERTIFICATE HOLDER**

The Harvey School

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



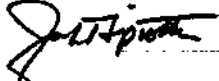
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- a. That if the person or organization is designated as a Team, the person or organization so designated shall be deemed to include team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the team, and if so indicated, a Field Owner, but only for liability arising out of the designated Team's amateur softball/baseball activities covered under this policy;
- b. That if the person or organization is designated as a League, the interest of the League shall not be included unless all teams in the League purchase this insurance.

When the interest of the League is so included, the person or organization designated as a League shall be deemed to include all teams in the league and team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the League or of any such teams, and if so indicated, a Field Owner, but only for liability arising out of the designated League's amateur softball/baseball activities covered under this policy;

All other terms and conditions of this policy remain unchanged.

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**COMPANIES AFFORDING COVERAGE**

CODE SUB-CODE

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Brewster Rockets SB LG  
 John Wahlers  
 40 Tonetta Lake Way  
 Brewster, NY 10509

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PRODUCTS-COMP/OPS AGGREGATE <b>\$2,000,000</b>
A	<input checked="" type="checkbox"/> PARTICIPANT LIABILITY	Number of Teams: 6			PERSONAL & ADVERTISING INJURY <b>\$2,000,000</b>
		*GENERAL AGGREGATE APPLIES PER TEAM			EACH OCCURRENCE <b>\$2,000,000</b>
					FIRE DAMAGE (Any one fire) <b>\$300,000</b>
					MEDICAL EXPENSES (Any one person) <b>\$10,000</b>

**IMPORTANT: TEAMS MUST BE CURRENTLY REGISTERED WITH ASA TO BE ELIGIBLE FOR COVERAGE.**

(Non-participants only)

**EFFECTIVE DATE / TEAM NAME**

**EFFECTIVE DATE / TEAM NAME**

**EFFECTIVE DATE / TEAM NAME**

1/1/2008 Brewster Rockets 10U  
 1/1/2008 Brewster Rockets 14U Older

1/1/2008 Brewster Rockets 12U  
 1/1/2008 Brewster Rockets 16U

1/1/2008 Brewster Rockets 14U Younger  
 1/1/2008 Brewster Rockets 18U

Important Note - If Waiver and Release Plan purchased, signed forms must be kept by Team/League for a minimum of three years.

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**CERTIFICATE HOLDER**

Town of Southeast

**CANCELLATION**

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AUTHORIZED REPRESENTATIVE


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- b. That if the person or organization is designated as a League, the interest of the League shall not be included unless all teams in the League purchase this insurance.

When the interest of the League is so included, the person or organization designated as a League shall be deemed to include all teams in the league and team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the League or of any such teams, and if so indicated, a Field Owner, but only for liability arising out of the designated League's amateur softball/baseball activities covered under this policy;

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**COMPANIES AFFORDING COVERAGE**

CODE SUB-CODE

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 SOFTBALL ASSOCIATION OF AMERICA**

Brewster Rockets SB LG  
 John Wahlers  
 40 Tonetta Lake Way  
 Brewster, NY 10509

COMPANY LETTER A

**MARKEL INSURANCE COMPANY**

COMPANY LETTER B

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

**COVERAGES**

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	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADVERTISING INJURY \$2,000,000
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EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME
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**CERTIFICATE HOLDER**

Town of Patterson

**CANCELLATION**

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**CERTIFICATE HOLDER**

Patterson Rec Center

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE




THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION FOR  
AMATEUR SOFTBALL ASSOCIATION OF AMERICA ACTIVITIES**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE FORM**

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

Named Insured As shown on the attached Certificate of Insurance		
Policy Number 3602AH230069	Policy Period 01/01/08 - 01/01/09	Endorsement Effective Date As shown on the attached Certificate of Insurance
Issued By <b>MARKEL INSURANCE COMPANY</b>	Authorized Representative 	

(The above information is required only when this endorsement is prepared after the policy is issued.)

**SCHEDULE**

**Name of Person or Organization:**

As shown on the attached Certificate of Insurance

**A. The following is added to Section II – WHO IS AN INSURED:**

The person or organization shown in the above SCHEDULE but only with respect to liability arising out of the organization, promotion, administration and conduct of amateur softball/baseball activities, including games, practices, tournaments, and fund-raising activities, under the rules of the Amateur Softball Association of America, provided:

- a. That if the person or organization is designated as a Team, the person or organization so designated shall be deemed to include team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the team, and if so indicated, a Field Owner, but only for liability arising out of the designated Team's amateur softball/baseball activities covered under this policy;
- b. That if the person or organization is designated as a League, the interest of the League shall not be included unless all teams in the League purchase this insurance.

When the interest of the League is so included, the person or organization designated as a League shall be deemed to include all teams in the league and team members, managers, coaches, assistants, batboys, registered scorekeepers, sponsors, any other individual participating in the official functions of the League or of any such teams, and if so indicated, a Field Owner, but only for liability arising out of the designated League's amateur softball/baseball activities covered under this policy;

All other terms and conditions of this policy remain unchanged.

# ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)  
1/4/2008

**PRODUCER**

**BOLLINGER**  
101 JFK PARKWAY  
SHORT HILLS, NJ 07078  
TELEPHONE: 1-800-526-1379

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**COMPANIES AFFORDING COVERAGE**

CODE

SUB-CODE

COMPANY LETTER A

**MARKEL INSURANCE COMPANY**

COMPANY LETTER B

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

**INSURED REGISTERED TEAMS OF THE AMATEUR SOFTBALL ASSOCIATION OF AMERICA**

Brewster Rockets SB LG  
John Wahlers  
40 Tonetta Lake Way  
Brewster, NY 10509

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	3602AH230069	*SEE EFFECTIVE DATES BELOW	01/01/09	GENERAL AGGREGATE <b>\$5,000,000</b>
X	COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OPS AGGREGATE <b>\$2,000,000</b>
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADVERTISING INJURY <b>\$2,000,000</b>
A	X PARTICIPANT LIABILITY	Number of Teams: 6			EACH OCCURRENCE <b>\$2,000,000</b>
		*GENERAL AGGREGATE APPLIES PER TEAM			FIRE DAMAGE (Any one fire) <b>\$300,000</b>
					MEDICAL EXPENSES (Any one person) <b>\$10,000</b>

**IMPORTANT: TEAMS MUST BE CURRENTLY REGISTERED WITH ASA TO BE ELIGIBLE FOR COVERAGE.**

(Non-participants only)

EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME	EFFECTIVE DATE / TEAM NAME
1/1/2008 Brewster Rockets 10U	1/1/2008 Brewster Rockets 12U	1/1/2008 Brewster Rockets 14U Younger
1/1/2008 Brewster Rockets 14U Older	1/1/2008 Brewster Rockets 16U	1/1/2008 Brewster Rockets 18U

**Important Note - If Waiver and Release Plan purchased, signed forms must be kept by Team/League for a minimum of three years.**

COVERAGE UNDER THIS POLICY SHALL APPLY TO LIABILITY OF THE INSURED TEAM/LEAGUE LISTED ABOVE ARISING OUT OF THE ADMINISTRATION, PLAY OR PRACTICE OF AMATEUR SOFTBALL/BASEBALL, BUT ONLY FOR INCIDENTS INVOLVING BODILY INJURY, PERSONAL INJURY OR PROPERTY DAMAGE. THE CERTIFICATE HOLDER BELOW IS NAMED AS AN ADDITIONAL INSURED TO THIS POLICY (SEE ENDORSEMENT PAGE ATTACHED).

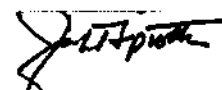
**CERTIFICATE HOLDER**

Turf World

**CANCELLATION**

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All other terms and conditions of this policy remain unchanged.